



March 3, 2021

Raised Bill No. 6321: An Act Concerning Adoption and Implementation of the Connecticut Parentage Act

Dear Chairs Stafstrom and Winfield, Vice Chairs Bergstein and Blumenthal, Ranking Members Kissel and Rebimbas, and Members of the Joint Committee on Judiciary:

My name is Dr. Mark Leondires, and I am the Founder and Medical Director of Reproductive Medicine Associates of Connecticut (RMACT). I am testifying in support of Raised Bill No. 6321, An Act Concerning Adoption and Implementation of the Connecticut Parentage Act.

I am board-certified in both Obstetrics and Gynecology and Reproductive Endocrinology and Infertility. Last year I served as the Chair of the LGBTQ Special Interest Group of the American Society for Reproductive Medicine (ASRM). I regularly speak as an expert at conferences on reproductive medicine and LGBTQ+ family formation. I am also a father of two sons. My husband, Greg, and I became parents through assisted reproduction. I am a founder of two family building organizations; Gay Parents to Be and Gays With Kids.

For me, becoming a parent was transformative. For many years, it was difficult to be secure in my sexuality while also pursuing my professional goals. (I am a veteran who served in the military during the era of Don't Ask, Don't Tell—a policy that quite literally prohibited me from being myself.) In the community in which Greg and I live, our children are different simply by virtue of being raised by a same-sex couple. Because of this, I need to be secure in my sexual orientation and out for my kids. Indeed, being a gay parent involves coming out again and again.

Unfortunately, we often find that our parent-child bonds are not treated with the respect they deserve. On a rare day off from my practice, I took my sons for a walk on the beach. A passer-by remarked that I was “giving [my] wife the day off.” When I responded that we were a two dad family, the stranger asked, “Which one is yours?” “Both,” I responded. “No, which one is really yours?,” the stranger persisted. “Both,” I responded again. The passer-by was of course suggesting that if one of the boys was my genetic child, then that child was *my* child. Conversely, if one of the boys was not my genetic child, then that child was *not* my child and was instead my husband's child. From our perspective, *and from the perspective of our boys*, Greg and I are both their parents.



Connecticut parentage law, unfortunately, continues to reflect this stranger's view—that those who are parenting children to whom they are not genetically connected are not real parents.

Of course, same-sex couples necessarily include a non-genetic parent. It is time for our law to reflect the reality of the diverse families across our state. Connecticut has been a leader on LGBT equality in other respects. It was one of the first states in the country to open marriage to same-sex couples. The legislature has repeatedly treated LGBTQ+ people and the families they form with dignity. Yet parentage law has remained unchanged, leaving many families vulnerable.

I see these families in my practice. My patients rely on the availability of assisted reproductive technologies (ART), such as intrauterine insemination (IUI) and in-vitro fertilization (IVF), to become parents. In fact, Connecticut has the second highest rate of birth through ART in the country.¹ To build their families, many of my patients require working with a gamete donor and a surrogate.

The number of LGBTQ+ people having children in Connecticut is only going to increase. Today, LGBTQ+ people make up 60% to 70% of the patients in my personal practice. LGBTQ+ people work harder to have children than most others. For us to be parents requires intention, resources, assistance from others, and services of professionals, such as doctors, lawyers, and social workers. It also requires a lot of love. Even when you've achieved your dream of parenthood, LGBTQ+ people still live in fear that someone is going to take their child. That shouldn't be the case, especially given how hard we work to have children. Being without the certainty that legal parentage affords is incredibly stressful.

I know this firsthand. Our first child was born in Pennsylvania, and our second child was born in Idaho. In both cases, Greg and I had to complete a second-parent adoption so that both of us would be treated as legal parents of our children. In other words, only one of us was a legal parent at the moment our children were born. With our second child, the wait was excruciating. Even though we had our son at home with us, it took six months to get the birth certificate listing both Greg and me as parents. That legal limbo was demeaning. It also posed practical problems. We wanted to take our son to meet his grandmother in Florida, but of course did not feel we could travel without the birth certificate. This moment of joy in any family became unnecessarily stressful and complicated.

¹ *State-Specific Assisted Reproductive Technology Surveillance*, CTRS. FOR DISEASE CONTROL & PREVENTION (Oct. 3, 2019), <https://www.cdc.gov/art/state-specific-surveillance/index.html>.



Greg and I are fortunate to have the resources and knowledge to do what is necessary to secure legal parentage, eventually. Not all parents in Connecticut are so fortunate. I know because I see many of them in my practice.

It is critical that both parents are recognized as parents by the law, and the process of securing parentage needs to be straightforward and timely. This is especially an issue for LGBTQ+ women in the state. Men who come to our practice to have children are ordinarily connected to lawyers by virtue of working with surrogacy agencies. But for women, the challenges to securing legal parentage may be unclear. Many women, quite reasonably, do not know they have to adopt their own children. Moreover, at a time when individuals are preparing to have a child and then actually are caring for a newborn, the last thing they may be thinking about is pursuing legal action to establish parentage. Even if they are thinking about it, it is especially daunting to put time and resources into legal proceedings while simply trying to survive through sleepless nights.

The CPA provides a much-needed update to Connecticut law by clarifying who is a parent and providing paths for individuals who have children through assisted reproduction to establish legal parentage regardless of sexual orientation, gender, or marital status. It is critical for children – and their loving parents – to establish legal parentage at birth. I also am pleased that the CPA regulates surrogacy in ways that protect the interests of all parties involved: the intended parents, the woman who serves as a surrogate, and the child. The CPA treats the intended parents as legal parents, and it provides important safeguards to women serving as surrogates.

I urge you to support Raised Bill No. 6321. Thank you for your consideration. Please feel free to contact me with any questions.

Sincerely,

Mark Leondires

Founder, Medical Director and Partner in reproductive endocrinology at Reproductive Medicine Associates of Connecticut (RMACT)
Past Chair, ASRM's LGBTQ Special Interest Group